2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000114154

Entity Name: LAKE FOREST ACQUISITION CORPORATION

FILED Apr 17, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1004 FARNAM ST, STE 400 OMAHA, NE 68102 **Current Mailing Address: New Mailing Address:** 1004 FARNAM ST, STE 400 OMAHA, NE 68102 FEI Number: 39-2013836 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BELL, C. ROBERTS Name: Name: 1004 FARNAM ST., STE 400 Address: Address: City-St-Zip: OMAHA, NE 68102 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: MILLER, JOHN Name: ROSKENS, RONALD 1004 FARNAM ST., STE40 1004 FARNAM ST., STE400 Address: Address: OMAHA, NE 68102 OMAHA, NE 68102 City-St-Zip: City-St-Zip: (X) Change () Addition Title: **PCEO** () Delete Title: PCFO CASSIDY, JOHN H CASSIDY, JOHN H Name: Name: 399 PARK AVE., 36TH FLOOR 1004 FARNAM ST. SUITE 400 Address: Address: City-St-Zip: NEW YORK, NY 10022 City-St-Zip: OMAHA, NE 68102 Title: VΡ () Delete Title: () Change () Addition REZAC, LISA Name: Name: Address: 1004 FARNAM ST., STE 400 Address: City-St-Zip: OMAHA, NE 68102 City-St-Zip: Title: VST () Delete Title: () Change () Addition HIATT, MARK A Name: Name: 1004 FARNAM ST., STE 400 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: MARK A. HIATT VST 04/17/2003

City-St-Zip:

OMAHA, NE 68102